

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AMERICARISINGPAC.ORG

ADDRESS (number and street)

PO BOX 100088

Check if different
than previously
reported. (ACC)

ARLINGTON

VA

22210

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00542902

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☒ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
11 29 2016

through

M M M / D D D / Y Y Y Y Y Y
12 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

RHOADES, MATTHEW, , ,

Type or Print Name of Treasurer

Signature of Treasurer

RHOADES, MATTHEW, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 31 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

AMERICARISINGPAC.ORG

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 29 / 2016 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		134756.71
(b) Cash on Hand at Beginning of Reporting Period.....	151726.08	
(c) Total Receipts (from Line 19)	97920.51	665117.91
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	249646.59	799874.62
7. Total Disbursements (from Line 31).....	56725.27	606953.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	192921.32	192921.32
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

AMERICARISINGPAC.ORG

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
11		29		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
12		31		2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

82000.00

541698.00

(ii) Unitemized

2.00

1647.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

82002.00

543345.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

15918.51

120918.51

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

97920.51

664263.51

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

854.40

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

97920.51

665117.91

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

97920.51

665117.91

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	56725.27	586953.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	56725.27	586953.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	20000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	56725.27	606953.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56725.27	606953.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	97920.51	664263.51
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	97920.51	664263.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	56725.27	586953.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	854.40
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	56725.27	586098.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHIAVACCI FAMILY FOUNDATION INC.

Mailing Address 9055 BANYAN DRIVE

City
CORAL GABLES

State
FL

Zip Code
33156

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 27 / 2016

Transaction ID : SA11AI.10666

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COPART, INC

Mailing Address 14185 DALLAS PARKWAY
SUITE 400

City
DALLAS

State
TX

Zip Code
75254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 27 / 2016

Transaction ID : SA11AI.10685

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILCORP ENERGY CORPORATION

Mailing Address P.O. BOX 61229

City
HOUSTON

State
TX

Zip Code
77208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 29 / 2016

Transaction ID : SA11AI.10670

Amount of Each Receipt this Period

50000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

61000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUFFINES, PHILLIP, , MR.,

Mailing Address 4415 S. VERSAILLES AVENUE

City
DALLASState
TXZip Code
75205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HUFFINES COMMUNITIESOccupation (for Individual)
FOUNDER/CO-OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 27 / 2016

Transaction ID : SA11AI.10673

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUBERT, IRA, , ,

Mailing Address 2929 ARCH STREET

City
PHILADELPHIAState
PAZip Code
19104FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LUBERT ADLEROccupation (for Individual)
PRIVATE EQUITY/REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2016

Transaction ID : SA11AI.10664

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUBERT, JONATHAN, , MR.,

Mailing Address 1 BLAKELEY ROAD

City
HAVERFORDState
PAZip Code
19041FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JL SQUARED GROUPOccupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2016

Transaction ID : SA11AI.10667

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

21000.00

TOTAL This Period (last page this line number only)..... ►

82000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OUR PRINCIPLES PAC

Mailing Address P. O. BOX 25046

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing
federal political committee.

C

C00603621

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

15918.51

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 30 / 2016

Transaction ID : SA11C.10677

Amount of Each Receipt this Period

15918.51

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

15918.51

TOTAL This Period (last page this line number only)..... ►

15918.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. BECHDEL, JEFFREY, W, ,

Mailing Address 2000 S. EADS STREET
#204City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
BECHDEL REIMBURSEMENT: SEE MEMO ENTRY

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			19			2016					

FEC Identification Number

C

Transaction ID : SB21B.10637

Amount of Each Disbursement this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WASHINGTON METROPOLITAN AREA TRANSIT AUTHORITY

Mailing Address 600 5TH STREET, NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
BECHDEL REIMBURSEMENT: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			19			2016					

FEC Identification Number

C

Transaction ID : SB21B.10637

Amount of Each Disbursement this Period

80.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CIDER SOLUTIONS, INC.

Mailing Address 1301 S. FERN ST. #2884

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
TECHNOLOGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			22			2016					

FEC Identification Number

C

Transaction ID : SB21B.10637

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2580.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS, INC.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		29		2016

Mailing Address 27A MIDSTATE DRIVE
SUITE 218City
AUBURNState
MAZip Code
01501Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10617

Amount of Each Disbursement this Period

35.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EPAY BUSINESS SOLUTIONS, INC.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		29		2016

Mailing Address 27A MIDSTATE DRIVE
SUITE 218City
AUBURNState
MAZip Code
01501Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10618

Amount of Each Disbursement this Period

288.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EPAY BUSINESS SOLUTIONS, INC.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		14		2016

Mailing Address 27A MIDSTATE DRIVE
SUITE 218City
AUBURNState
MAZip Code
01501Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10631

Amount of Each Disbursement this Period

35.30

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

358.75

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		14		2016

Mailing Address 27A MIDSTATE DRIVE
SUITE 218City
AUBURNState
MAZip Code
01501Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10632

Amount of Each Disbursement this Period

264.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EPAY BUSINESS SOLUTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2016

Mailing Address 27A MIDSTATE DRIVE
SUITE 218City
AUBURNState
MAZip Code
01501Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10642

Amount of Each Disbursement this Period

38.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EPAY BUSINESS SOLUTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2016

Mailing Address 27A MIDSTATE DRIVE
SUITE 218City
AUBURNState
MAZip Code
01501Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10643

Amount of Each Disbursement this Period

528.59

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

831.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. GRAHAM ADVISORS, LLC

Mailing Address 1135 N. GLENMOOR CT

City
WICHITAState
KSZip Code
67206Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2016

FEC Identification Number

C**Transaction ID : SB21B.10628**

Amount of Each Disbursement this Period

9.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JONES DAY

Mailing Address 51 LOUISIANA AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2016

FEC Identification Number

C**Transaction ID : SB21B.10629**

Amount of Each Disbursement this Period

4537.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JONES DAY

Mailing Address 51 LOUISIANA AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2016

FEC Identification Number

C**Transaction ID : SB21B.10640**

Amount of Each Disbursement this Period

1575.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6121.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. KELLY & ASSOCIATES INSURANCE GROUP

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		07		2016

Mailing Address 1 KELLY WAY

City
SPARKSState
MDZip Code
21152Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10627

Amount of Each Disbursement this Period

948.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REED, COLIN, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		29		2016

Mailing Address 7 RUSSELL BLVD
APT. DCity
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10619

Amount of Each Disbursement this Period

5625.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REED, COLIN, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		29		2016

Mailing Address 7 RUSSELL BLVD
APT. DCity
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
EMPLOYEE CELL PHONE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10621

Amount of Each Disbursement this Period

50.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6623.07

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. REED, COLIN, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			14			2016					

Mailing Address 7 RUSSELL BLVD
APT. DCity
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10633

Amount of Each Disbursement this Period

5625.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REED, COLIN, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			14			2016					

Mailing Address 7 RUSSELL BLVD
APT. DCity
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
EMPLOYEE CELL PHONE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10634

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REED, COLIN, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2016					

Mailing Address 7 RUSSELL BLVD
APT. DCity
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10644

Amount of Each Disbursement this Period

10625.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

16300.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. REED, COLIN, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Mailing Address 7 RUSSELL BLVD
APT. DCity
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
EMPLOYEE CELL PHONE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10645

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REVES, COOPER, N, ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2016

Mailing Address 1600 MARYLAND AVE NE
APT 148City
WASHINGTONState
VAZip Code
20002Purpose of Disbursement
SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10621

Amount of Each Disbursement this Period

2395.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REVES, COOPER, N, ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2016

Mailing Address 1600 MARYLAND AVE NE
APT 148City
WASHINGTONState
VAZip Code
20002Purpose of Disbursement
EMPLOYEE CELL PHONE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.10622

Amount of Each Disbursement this Period

50.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

2495.84

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. REVES, COOPER, N, ,Mailing Address 1600 MARYLAND AVE NE
APT 148City
WASHINGTONState
VAZip Code
20002Purpose of Disbursement
SALARY

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				14				2016					

FEC Identification Number

C**Transaction ID : SB21B.10635**

Amount of Each Disbursement this Period

2395.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REVES, COOPER, N, ,Mailing Address 1600 MARYLAND AVE NE
APT 148City
WASHINGTONState
VAZip Code
20002Purpose of Disbursement
EMPLOYEE CELL PHONE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				14				2016					

FEC Identification Number

C**Transaction ID : SB21B.10636**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REVES, COOPER, N, ,Mailing Address 1600 MARYLAND AVE NE
APT 148City
WASHINGTONState
VAZip Code
20002Purpose of Disbursement
SALARY

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2016					

FEC Identification Number

C**Transaction ID : SB21B.10646**

Amount of Each Disbursement this Period

4895.84

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7341.68

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. REVES, COOPER, N, ,Mailing Address 1600 MARYLAND AVE NE
APT 148City
WASHINGTONState
VAZip Code
20002Purpose of Disbursement
EMPLOYEE CELL PHONE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2016					

FEC Identification Number

C

Transaction ID : SB21B.10647

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORYMailing Address 1033 NORTH FAIRFAX STREET
SUITE 400City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				29				2016					

FEC Identification Number

C

Transaction ID : SB21B.10623

Amount of Each Disbursement this Period

0.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORYMailing Address 1033 NORTH FAIRFAX STREET
SUITE 400City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				08				2016					

FEC Identification Number

C

Transaction ID : SB21B.10631

Amount of Each Disbursement this Period

8707.76

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

8757.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICARISINGPAC.ORG

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORYMailing Address 1033 NORTH FAIRFAX STREET
SUITE 400City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2016

FEC Identification Number

C**Transaction ID : SB21B.10638**

Amount of Each Disbursement this Period

1420.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORYMailing Address 1033 NORTH FAIRFAX STREET
SUITE 400City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2016

FEC Identification Number

C**Transaction ID : SB21B.10641**

Amount of Each Disbursement this Period

3750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5170.00

TOTAL This Period (last page this line number only).....▶

56580.27